

RECEIVED COMM. OF ELECTIONS

7008 AUG 11 P 3: 38

Campaign Finance Section Financial Reports

Financial Reports are required to be submitted to the Campaign Finance Section of the Office of the State Election Commissioner by all Candidates, Committees and Organizations. Late or incomplete reports are subject to fines levied by the Commissioner's Office, so please be sure to check all applicable deadlines and file on time. Add extra sheets if necessary.

Full Organization Name:	Friends	to Elect Allan Angel	. 2001 - 11	
Account Number:	.—————		Date of	this Report: 08/11/08
REPORTING PERIOD:	FROM:	01/01/08	_ TO:	08/10/08
Check the box that applies	to this report:			
Primary Election	□ 8-DAY	☒ 30-DAY		Office:
General Election	□ 8-DAY	□ 30-DAY		Kent County Levy Court, 3rd District
Other Election	□ 8-DAY	□ 30-DAY		
Special Election	□ 8-DAY	□ 30-DAY		
Year End Report	Final O	ganization Closing		Closing Date:
regulations regarding Cam _l	paign Finance	and the election proces	s in the St	is accurate and correct. I agree to abide by all rules and tate of Delaware. I understand that representatives from information provided on this report.
James	Hon			08/11/08
TREASURER SIGNATURE	E.			DATE
alla	~ \	legel		08/11/08
CANDIDATE SIGNATURE		4	7/2	DATE



STATEMENT OF ACCOUNT BALANCE

AC	CCOUNT #:	REPORTING PERIOD:	01/01/08	08/10/08
			FROM	то
1.	BEGINNING BALANCE (Ending Balance from last reporting period	od)		\$311.76
2.	RECEIPTS:			
	A. SCHEDULE A – TOTAL RE	CCEIPTS		9,742.00
	B. SCHEDULE C-1 – TOTAL I	N-KIND CONTRIBUTIONS		\$0.00
	C. SCHEDULE D-1 – TOTAL I	OANS RECEIVED		1,049.00
	D. SCHEDULE E – TOTAL EX	PENSE REIMBURSEMENTS RECI	EIVED	\$0.00
	E. SUBTOTAL (Total of A, B, C, D)			\$10,791.00
3.	EXPENDITURES:			
	F. SCHEDULE B – TOTAL EX	PENDITURES		\$6,229.60
	G. SCHEDULE C-2 – TOTAL I	N-KIND EXPENDITURES		\$0.00
	H. SCHEDULE D-2 – TOTAL I	LOAN PAYMENTS		\$0.00
	I. SCHEDULE E – TOTAL EX	PENSE REIMBURSEMENTS PAID		\$638.72
	J. SUBTOTAL (Total of F, G, H, I)			\$6,868.32
4.	ENDING BALANCE (Beginning Balance plus 2E, minus 3J)			\$4,234.44
5.	VALUE OF NON-CASH ASSETS (From S	Schedule F)		
6.	VALUE OF DISPOSED/TRANSFERRED	ASSETS (From Schedule G)		
7.	VALUE OF LOANS AT END OF PERIOR	D (Loan Balance from Schedule D-2)		\$1,049.00
8.	CLOSE OUT BALANCE (Must equal zero	o if Committee closed)		\$4,234.44
	Campaign Finance Section	Page 2 of 11		Financial Reports (08/04)



SCHEDULE A - TOTAL RECEIPTS

ACCT #:	REPORTING PERIOD:	01/01/08	08/10/08	
		FROM	TO	

Itemize all receipts over \$100 for the reporting period. Receipts from sales of items must be itemized if they are over \$50. NOTE: If you receive funds from the same person or organization several times during the reporting period, each item must be listed if the **aggregate** amount is over \$100, even if the individual amounts are not.

RECEIPTS IN EXCESS OF \$100:

Date Received	Contributor Name	Contributor Mailing Address	Aggregate Amount	Amount Received
06/27/08	Paul & Karen Reichelt	1675 Tuxward Rd, Hartly, DE 19953		\$400.00
07/31/08	Paul Davis	5233 S DuPont Hwy, Dover, DE 19901	n-nematic st	\$345.00
11/03/A/A/BA/COCCEDITION AND A 14/05	R A Nagle & Assoc	316 Bay Dr, Dover, DE 19901		\$150.00
	Ross Trader	12 Lotus St. Dover, DE 19901	NAME OF TAXABLE PARTY.	\$200.00
	Vaughn & Loretta Wooten	6039 Carpenter Bridge Rd Felton, DE 19943		\$100.00
	4780 LLC	9 E Loockerman St, Dover, DE 19901	2 2 2 2 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3	\$100.00
07/31/08	Albert Holmes	PO Box 625, Dover, DE 19903	To The Item	\$500.00
08/10/08	Barbara J Fournier	599 Kersey Rd, Dover, DE 19979		\$100.00
08/10/08	Betty Lou McKenna	PO Box 721, Dover, DE 19903		\$150.00
	Boyd White	164 Winners Circle, Magnolia, DE 19962		\$100.00
07/31/08	Bradley S Ebay	233 Pebble Valley Dr, Dover, DE 19904		\$350.0
	David Egan	74 N Bay Drive, Dover, DE 19901	Part of the last	\$177.0
07/02/08	Deborah Street	658 Dyke Branch Rd, Dover, DE 19901		\$100.0
08/01/08	Denise Letterman	921 Woodcrest Drive, Dover, DE 19904		\$410.0
08/01/08	Ennis Senate Campaign Comm.	522 Smyrna Clayton Blvd Smyrna DE 19977		\$200.0
	Harold & Cynthia Brode	322 Weiner Ave, Harrington, DE 19952		\$100.0
	Jay Goodfellow	No address available, Leipsic, DE		\$100.0
	John Marcus	897 Wilson Drive, Dover, DE 19904	N. N. M.	\$600.0
	John T Borden	456 S DuPont Hwy, Dover, DE 19901		\$200.0
	K and C Painting	1153 Horsepond Rd. Dover, DE 19901	The second	\$100.0
	Kenneth W Edwards	570 N American Ave, Dover, DE 19901		\$250.0
07/31/08	William Pepper	11 Ronald Rich Blvd, Harrington De 19952		\$300.0
	Woodside MiniStorage	1685 Main St, Woodside, DE 19980		\$380.0
08/01/08	Anonymous	Money left in envelop- no donor name		\$250.0
OTAL RE	CEIPTS IN EXCESS OF \$100			\$5,662.0
OTAL RE	CEIPTS NOT IN EXCESS OF \$1	00		\$4,080.0
2011년째 172일 - 장신주	TAL RECEIPTS SHOULD ALSO APPEAR ON PAGE 2,	STATEMENT OF ACCOUNT BALANCE, ITEM 2A)		\$9,742.0



SCHEDULE B - TOTAL EXPENDITURES

ACCT #:	REPORTING PERIOD:	01/01/08	08/10/08	
		FROM	TO	

Itemize all expenditures over \$100 for the reporting period. All expenditures to Political Committees must be itemized, regardless of the amount. NOTE: IF you expend funds to the same person or organization several times during the reporting period, each item must be listed if the **aggregate** amount is over \$100, even if the individual amounts are not.

EXPENDITURES IN EXCESS OF \$100:

Date Expended	Payee Name	Payee Mailing Address	Aggregate Amount	Amount Expended
07/30/08	DbyD Printing	59 S Longwood Lane, Clayton, DE 19938		\$1,524.50
	Village Graphics	1 S Main St. Camden, DE 19934		\$2,352.50
	Delaware Elections	Dover, DE 19901		\$1,049.00
A. Concess Street B. 1985 TWO	Little Creek Ladies Aux	Little Creek Fire Hall, Little Creek, DE	di la cultila de	\$1,000.00
A CONTRACTOR OF THE PARTY OF TH	Delaware Ag Museum	Rt 13, Dover, DE		\$125.00
TOTAL EX	PENDITURES IN EXCESS O	F \$100		\$6,051.00
TOTAL EX	PENDITURES NOT IN EXCI	ESS OF \$100		\$178.60
	TAL EXPENDITURES	E 2, STATEMENT OF ACCOUNT BALANCE, ITEM 3F)		\$6,229.60



ACCT#	-	REPORTING F	PERIOD: 01/01/08 FROM		08/10/08 ΓΟ
				,	10
	SSO RECEIVED DURING THIS REPORTI D IN EXCESS OF \$50:	NG PERIOD should be itemized on this schedule. NOTE: The	ese loans must also be listed on Schedule D-2.		
Date Received	Lender Name and Mailing Address	Endorser Name and Mailing Address	Description of Security	Int Rate	Amount Received
01/01/08 Allan A	ngel	Same	None	0,00%	\$1,049.00
					3517
11 1 1 1 1 1 1 1			AN BEAUTY CONTROL		34.748
TOTAL LOANS BE	CENTER				\$1,049,00

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(TOTAL AMOUNT RECEIVED SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCOUNT BALANCE, ITEM 2C)



ACCT #:	REPORTING PERIOD:	01/01/08	08/10/08	
		FROM	TO	

All outstanding loans in excess of \$50 must be listed. This includes loans from Lending Institutions, Candidate's Personal Funds and Other Contributors.

LOANS IN EXCESS OF \$50:

Date Received	Lender Name and Mailing Address	Endorser Name and Mailing Address	Description of Security	Int Rate	Original Loan Amount	Payments Made	Loan Balance
01/01/08	Allan Angloc Alice	same	none	0.00%	\$1,049.00	\$0,00	\$1,049.00
	•		A CONTRACT TO SERVICE STATE	-1.4		100	\$0.0
							\$0.0
- 42		Mary Director					\$0.0
							\$0.0
					E E WE		\$0.0
ME !							\$0.0
							\$0.0
							\$0.0
							\$0.0
							\$0.0
					1.000		\$0.0
							\$0.0
							\$0.0
OTAL LO		D ON DACE 1 STATEMENT OF 1 COOLING	T BALANCE, ITEM 3H; TOTAL LOAN BALANCE SHOULD ALSO	APPEAR ON BACK	\$1,049.00	\$0.00	\$1,049.00

SCHEDULE E - EXPENSE REIMBURSEMENTS

CCT#:			REPORTIN	G PERIOD:	01/01/08
			18-2-		FROM
	ements received by you and paid by you must be				
Date Received	Reimburser Name and Mailing Address	Description of Activity	Activity Date	Total Expense Amount	Reimbursement Received
N/A					
EIMBURSEMENTS RE		thers for expenses they incurred.)		\$0.00	\$0.00
IMBURSEMENTS RE			Activity Date	\$0.00 Total Expense Amount	\$0.00 Reimbursement Paid
EIMBURSEMENTS RE EIMBURSEMENT Date Paid 06/30/08 Peggy A	S PAID (Monies paid by you to reimburse of Payee Name and Mailing Address	thers for expenses they incurred.) Description		Total	Reimbursement
EIMBURSEMENT Date Paid 06/30/08 Peggy A	TS PAID (Monies paid by you to reimburse of Payee Name and Mailing Address	thers for expenses they incurred.) Description of Activity	Date	Total Expense Amount	Reimbursement Paid
EIMBURSEMENT Date Paid 06/30/08 Peggy A	S PAID (Monies paid by you to reimburse of Payee Name and Mailing Address	thers for expenses they incurred.) Description of Activity reimbursement for fund raising supplies	06/27/08	Total Expense Amount \$525.81	Reimbursement Paid \$525.81
EIMBURSEMENT Date Paid 06/30/08 Peggy A	S PAID (Monies paid by you to reimburse of Payee Name and Mailing Address	thers for expenses they incurred.) Description of Activity reimbursement for fund raising supplies	06/27/08	Total Expense Amount \$525.81	Reimbursement Paid \$525.81
EIMBURSEMENT Date Paid 06/30/08 Peggy A	S PAID (Monies paid by you to reimburse of Payee Name and Mailing Address	thers for expenses they incurred.) Description of Activity reimbursement for fund raising supplies	06/27/08	Total Expense Amount \$525.81	Reimbursement Paid \$525.81

(REIMBURSEMENTS PAID TOTAL SHOULD ALSO APPEAR ON PAGE 2, STATEMENT OF ACCOUNT BALANCE, ITEM 31)